CSCL/LBL-010 (7/14) Page 1

Michigan Department of Licensing and Regulatory Affairs Corporations, Securities & Commercial Licensing Bureau Licensing Division - BUILDERS P.O. Box 30245, Lansing, MI 48909 517-241-9288 www.michigan.gov/builders

| FOR OFFICE USE ONLY Approved By: |
|----------------------------------|
| Date Approved: |
| License Number |

APPLICATION FOR RESIDENTIAL BUILDER OR MAINTENANCE & ALTERATION CONTRACTOR LICENSE, RELICENSURE OR REINSTATEMENT

AUTHORITY: 1980 PA 299, MCL 338.3434(A), AND 42 USC 654
PENALTY: FAILURE TO PROVIDE THIS INFORMATION MAY RESULT IN DENIAL OF THE APPLICATION

| AND/OR DISCIPLIN | IARY ACTION. | | | | | |
|---|--|--|--------------------------------|------------|-----------------------------|--|
| Name | | | Date of Birth | U.S. S | U.S. Social Security Number | |
| Assumed Name (if applicable) | | | Permanent ID # (if applicable) | | | |
| Business Address (Not a PO Box) | | City | | State | ZIP Code | |
| Mailing Address (if different) | | City | | State | ZIP Code | |
| Telephone Number | | E-Mail Address | | | | |
| Yes No Do you have any unsatisfied p | d of a felony you have not previously report | · | | • | only) | |
| Yes No | TORMATION (OL LO B.) | Teop office use or | TOD 05 | | NII.V. VALIDATION | |
| FEE PAYMENT IN | FORMATION (Check One Box) | FOR OFFICE USE ON | LY FOR OF | FICE USE O | NLY - VALIDATION | |
| ☐ Individual Residential Builder \$195.00 | | (2101-01 = \$165.00) (2101-15 = \$ 30.00) | | | | |
| New Individual Residential Builder - Veteran (see required additional documents) | | | | | | |
| ☐ Individual Residential Builder Relicensure \$185.00 | | (2101-06 = \$170.00) (2101-15 = \$ 15.00) | | | | |
| Individual Residential Builder Reinstatement \$15.00 (only if license is currently revoked) | | (2101-50 = \$ 15.00) | | | | |
| Individual Maintenance & Alteration Contractor (You must check one or more trade(s) below) \$195.00 | | (2103-01 = \$165.00) (2103-15 = \$ 30.00) | | | | |
| Carpentry (A) | ☐ House Wrecking (R) | | | | | |
| Concrete (B) | Screens & Storm Sash (N) | | | | | |
| Excavation (D) | Gutters (O) | | | | | |
| Roofing (M) | Tile & Marble (P) | | | | | |
| ☐ Masonry (I) | Swimming Pools (S) | | | | | |
| Described (1) | ☐ Basement Waterproofing (T) ☐ Insulation Work (G) | | | | | |
| ☐ Siding (K) | | | | | | |
| New Maintenance & Alteration Contractor - Veteran (You must check one or more trade(s) above) (see required additional documents) | | | | | | |
| Individual Maintenance & Alteration Contractor \$185.00 Relicensure | | (2103-06 = \$170.00) (2103-15 = \$ 15.00) | | | | |
| Maintenance & Alteration Contractor Reinstatement \$15.00 (only if license is currently revoked) | | (2101-50 = \$ 15.00) | | | | |
| Make your check or money order in U.S. Currency payable to: | | | | | | |
| STATE OF MICHIGAN | | | | | | |
| FEES ARE AUTHORIZED BY THE STATE LICENSE FEE ACT, 1979 PA 152, AND ARE NOT REFUNDABLE. | | | | | | |

| Have you completed the required 60 hours of approved prelicensure education consisting of at least competency: | 6 hours of courses in each of the following areas of |
|--|---|
| 1) Business management, estimating, and job costing, 2) Design and building science, 3) Contracts, 5) Project management and scheduling, 6) the current Michigan residential code and Construction sa occupational safety and health act, 1974 PA 154, MCL 408.1001 to 408.1094? | |
| Yes No | |
| If you answered no to the above question, were you licensed as a residential builder, residential M $\&$ 21, 2007 or did you hold one of these license types at any time within nine years prior to the date you | |
| ☐ Yes ☐ No | |
| Have you served in the Armed Forces? | |
| ☐ Yes ☐ No | |
| If you answered yes to the question above, while service in the armed forces were you engaged in the or demolition of buildings or other structures? | e erection, construction, replacement, repair, alteration, |
| ☐ Yes ☐ No | |
| Required Additional Documents: | |
| Copy of operator's license or state personal identification card | |
| Copy of Assumed Name Certificate (if applicable) | |
| Consent to Service of Process (if applicable) | |
| If requesting a fee waiver as an individual who served in the armed forces - form DD214, DD215, demonstrates you were separated from service with an honorable character of service or under h | |
| If requesting a prelicensure education waiver you will also need to submit: | |
| An affidavit signed by a commanding officer, supervisor, or military superior with direct knowledg basic knowledge of each of the areas of prelicensure competencies. | e of the service you have, entry-level experience in or |
| OR | |
| If you meet the requirements of the armed forces exemption, but do not have entry-level experier prelicensure competencies, you may provide an affidavit signed by a commanding officer, superv service that states in which of those areas of competency you have entry-level experience or bas the applicant credit toward the 60-hour prelicensure education requirement based on that experie | risor, or military superior with direct knowledge of your ic knowledge. (The department may in its discretion grant |
| Certification | |
| I certify that the statements in this document are true and complete. I understand that any omitted st denial of my application, disciplinary action, or may be punishable by law. I agree the Department is pursuant to MCL 338.3434(a), that the information will be used for purposes of identification and to mean the complete of the com | required by law to obtain my social security number |
| Signature | Date |
| | |